Capital Gain Deduction Worksheet



This deduction is subject to review by the Iowa Department of Revenue.

Should the Department request it, the information below will be needed to verify whether you qualify for the deduction. Other information, in addition to that shown on this checklist, may also be required in some situations.

Gains from the sale of stocks or bonds DO NOT qualify for the deduction, with the following exception: effective with tax year 2012, 50% of the gain from the sale/exchange of employer securities of an lowa corporation to a qualified lowa employee stock ownership plan (ESOP) may be eligible for the lowa capital gain deduction. To be eligible, the lowa ESOP must own at least 30% of all outstanding employer securities issued by the lowa corporation after completion of the transaction.

Location of Property:		
Intended Use of Property:		
Actual Use of Property:		
Acquisition Date:	How Acquired:	
Date of Sale:	Term of Sale (completed sale or installment sale):	
Purchaser:		
Purchaser's Relationship to Owner (if any):		
PART 1: MATERIAL PARTICIPATION TEST	FOR SALE OF REAL PROPERTY OR SALE OF BUSINESS (CHECK ALL THAT APPLY):	
Detailed records should be kept by the taxp proof is on the taxpayer to demonstrate mate	ayer (on as close to a daily basis as possible) because the burden of erial participation.	
Participates more than 500 hours in t	the tax year (records required)	
Participation constitutes all participation in the business (records required)		
Participates more than 100 hours in the tax year and no one else participates more (records required)		
Participates in two or more businesses, excluding rental business, and participates more than 500 hours in all businesses, or more than 100 hours in each business (records required)		
Participates in 5 of the last 10 years	(records required)	
Participates in personal service activ	rity for at least 3 years (records required)	
Participates more than 100 hours an		

PAR	RT 2: SALE OF FARMLAND	
1.	Are you a retired farmer? Yes No	
	If yes, provide the date you began receiving Social Security old-age benefits:	
2.	Are you a disabled farmer? Yes No No	
	If yes, provide the date your disability began:	
3.	Are you are a surviving spouse of a farmer? Yes No	
	If yes, were you retired on the date of your spouse's death? Yes No No	
4.	How was farm real estate operated? (check one):	
	By taxpayer: Cash rent: Crop share:	
	If crop share, was the income reported on federal form 4835? Yes No	
	If crop share, was the income subject to self-employment tax?	
	Yes No No	
PAF	RT 3: SALES OF BUSINESS	
1.	What types of assets were sold?	
	Fair market value of assets sold: \$	
2.	What types of assets were NOT sold?	
	Fair market value of assets NOT sold: \$	
3.	What were the duties of the owner(s)?	
4.	Was gain reported under IRC Section 331 or 338? Yes No	
PA	RT 4: SALE OF CATTLE / HORSES AND BREEDING STOCK	
1.	Was more than 50% of your gross income from farming or ranching activities? Yes ☐ No ☐	
2.	What types of animals were sold?	
	For what purpose were these animals kept?	
PAF	RT 5: SALE OF TIMBER	
1.	Was gain reported under IRC Section 1231? Yes No	